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C. Brant Cook 39,151  
Name of Attorney/Agent Registration No.  
*C. Brant Cook*  
Signature of Attorney

1751

IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT

Case No. 7575 R&

Box \_\_\_\_\_

ASSISTANT COMMISSIONER FOR PATENTS  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Inventor(s): M.R. Sivik et al. Confirmation No. 7872

Serial No.: 09/702,084 Group Art Unit: 1751

Date Filed: 10/30/2000 Examiner: P.D. Niland

Title: Compositions and Methods For Using Zwitterionic Polymeric Suds Enhancers

1.  No additional fee is known to be required.
2.  The fee has been calculated as shown below:

|   | (Col. 1)                                  | (Col. 2) | (Col. 3)                              | OTHER THAN A SMALL ENTITY |               |
|---|---|----------|---------------------------------------|---------------------------|---------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |          | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA*         | RATE      FEE |
| TOTAL                                     | *   | MINUS    | **                                    | =                         | x \$18 = \$   |
| INDEP.                                    | *   | MINUS    | ***                                   | =                         | x \$84 = \$   |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |          |                                       |                           | + \$280 = \$  |
|   |   |          |                                       |                           | TOTAL      \$ |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3.  The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$ for a -month extension of time.
4. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
  - a.  Any patent application processing fees under 37 CFR §1.16.
  - b.  Any patent application processing fees under 37 CFR §1.17.
5. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

*C. Brant Cook*

C. Brant Cook

Attorney or Agent for Applicant(s)

Registration No. 39,151

Tel. No. (513) 627-2013

Date: September 26, 2002

Customer No. 27752

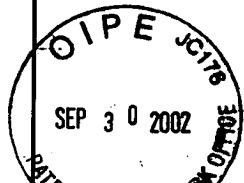
(last revised 7/1/02)

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.



TOTAL AMOUNT OF PAYMENT (\$180.00)

**Complete if Known**

|                         |                   |
|-------------------------|-------------------|
| <i>RECEIVED</i>         | OCT 02 2002       |
| Application Number      | 09/702,084        |
| Confirmation Number     | 7872              |
| Filing Date             | 10/30/2002        |
| First Named Inventor    | Mark Robert Sivik |
| Examiner Name           | P.D. Niland       |
| Group/Art Unit          | 1751              |
| TOTAL AMOUNT OF PAYMENT | (\$180.00)        |
| Attorney Docket No.     | 7575R&            |

**METHOD OF PAYMENT (check one)**

- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter &amp; Gamble Company

[X] Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17

**FEE CALCULATION (continued)**

|  |   |
|--|---|
| 1. [X]   | The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: |
| Deposit Account Number 16-2480   |   |
| Deposit Account Name The Procter & Gamble Company                              |   |
| [X] Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17 |   |

**3. ADDITIONAL FEES**

| Code   | (\$)   | Fee Description   | Fee Paid                 |
|--|--------|---|--------------------------|
| 105  | 130    | Surcharge-late filing fee or oath   | <input type="checkbox"/> |
| 127  | 50     | Surcharge-late provisional filing fee or cover sheet  | <input type="checkbox"/> |
| 139  | 130    | Non-English specification   | <input type="checkbox"/> |
| 147  | 2,520  | For filing a request for <i>ex parte</i> reexamination  | <input type="checkbox"/> |
| 112  | 920*   | Requesting publication of SIR prior to Examiner's action  | <input type="checkbox"/> |
| 113  | 1,840* | Requesting publication of SIR after Examiner's action   | <input type="checkbox"/> |
| 115  | 110    | Extension for reply within 1 <sup>st</sup> month  | <input type="checkbox"/> |
| 116  | 400    | Extension for reply within 2 <sup>nd</sup> month  | <input type="checkbox"/> |
| 117  | 920    | Extension for reply within 3 <sup>rd</sup> month  | <input type="checkbox"/> |
| 118  | 1,440  | Extension for reply within 4 <sup>th</sup> month  | <input type="checkbox"/> |
| 128  | 1,960  | Extension for reply within 5 <sup>th</sup> month  | <input type="checkbox"/> |
| 119  | 320    | Notice of Appeal  | <input type="checkbox"/> |
| 120  | 320    | Filing a brief in support of an appeal  | <input type="checkbox"/> |
| 121  | 280    | Request for oral hearing  | <input type="checkbox"/> |
| 138  | 1,510  | Petition to institute a public use proceeding   | <input type="checkbox"/> |
| 140  | 110    | Petition to revive - unavoidable  | <input type="checkbox"/> |
| 141  | 1,280  | Petition to revive - unintentional  | <input type="checkbox"/> |
| 142  | 1,280  | Utility issue fee (or reissue)  | <input type="checkbox"/> |
| 143  | 460    | Design issue fee  | <input type="checkbox"/> |
| 122  | 130    | Petitions to the Commissioner   | <input type="checkbox"/> |
| 123  | 50     | Petitions related to provisional applications (37 C.F.R. 1.17(q))   | <input type="checkbox"/> |
| 126  | 180    | Submission of Information Disclosure Statement  | [180]                    |
| 146  | 740    | Filing a submission after final rejection (37 CFR § 1.129(a))   | <input type="checkbox"/> |
| 149  | 740    | For each additional invention to be examined (37 CFR § 1.129(b))  | <input type="checkbox"/> |
| 179  | 740    | Request for Continued Examination (RCE)   | <input type="checkbox"/> |
| 169  | 900    | Request for expedited examination of a design application   | <input type="checkbox"/> |
| 091  | 1280   | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> |
| Other fee (specify) _____ <input type="checkbox"/> |        |   |                          |
| Other fee (specify) _____ <input type="checkbox"/> |        |   |                          |

SUBTOTAL (2) (\$180.00)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL(3) (\$180.00)

**SUBMITTED BY**

|                   |                      |                                      |        |           |                |
|-------------------|----------------------|--------------------------------------|--------|-----------|----------------|
| Name (Print/Type) | C. Brant Cook        | Registration No.<br>(Attorney/Agent) | 39,151 | Telephone | (513) 627-2013 |
| Signature         | <i>C. Brant Cook</i> |                                      |        | Date      | 9/26/2002      |

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231.